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5 **BEFORE THE**  
6 **BOARD OF REGISTERED NURSING**  
7 **DEPARTMENT OF CONSUMER AFFAIRS**  
8 **STATE OF CALIFORNIA**

9 In the Matter of the Accusation Against:

Case No. 2012-392

10 **SHARON ANN MOORE, a.k.a.**  
11 **SHARON ANN BILLINGSLEY**  
12 **12067 Alta Carmel Court, Unit 60**  
13 **San Diego, CA 92128**

**DEFAULT DECISION AND ORDER**

14 **Registered Nurse License No. 488964**

[Gov. Code, §11520]

Respondent.

15 **FINDINGS OF FACT**

16 1. On or about December 22, 2011, Complainant Louise R. Bailey, M.Ed., RN, in  
17 her official capacity as the Executive Officer of the Board of Registered Nursing, Department of  
18 Consumer Affairs, filed Accusation No. 2012-392 against Sharon Ann Moore (Respondent)  
before the Board of Registered Nursing. (Accusation attached as Exhibit A.)

19 2. On or about March 31, 1993, the Board of Registered Nursing (Board) issued  
20 Registered Nurse License No. 488964 to Respondent. The Registered Nurse License was in full  
21 force and effect at all times relevant to the charges brought in Accusation No. 2012-392 and will  
22 expire on April 30, 2013, unless renewed.

23 3. On or about December 22, 2011, Respondent was served by Certified and First  
24 Class Mail copies of the Accusation No. 2012-392, Statement to Respondent, Notice of Defense,  
25 Request for Discovery, and Discovery Statutes (Government Code sections 11507.5, 11507.6,  
26 and 11507.7) at Respondent's address of record which, pursuant to California Code of  
27 Regulations, title 16, section 1409.1 and Business and Professions Code (Code) section 136, is

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1 required to be reported and maintained with the Board, which was and is: 12067 Alta Carmel  
2 Court, Unit 60, San Diego, CA 92128.

3 4. Service of the Accusation was effective as a matter of law under the provisions of  
4 Government Code section 11505, subdivision (c) and/or B & P Code section 124.

5 5. On or about January 3, 2012, the domestic return receipt was received by the  
6 Board of Registered Nursing indicating a delivery of the accusation on December 28, 2011.

7 6. Government Code section 11506 states, in pertinent part:

8 (c) The respondent shall be entitled to a hearing on the merits if the  
9 respondent files a notice of defense, and the notice shall be deemed a specific  
10 denial of all parts of the accusation not expressly admitted. Failure to file a notice  
of defense shall constitute a waiver of respondent's right to a hearing, but the  
agency in its discretion may nevertheless grant a hearing.

11 7. Respondent failed to file a Notice of Defense within 15 days after service upon  
12 her of the Accusation, and therefore waived her right to a hearing on the merits of Accusation  
13 No. 2012-392.

14 8. California Government Code section 11520 states, in pertinent part:

15 (a) If the respondent either fails to file a notice of defense or to appear at  
16 the hearing, the agency may take action based upon the respondent's express  
17 admissions or upon other evidence and affidavits may be used as evidence  
without any notice to respondent.

18 9. Pursuant to its authority under Government Code section 11520, the Board finds  
19 Respondent is in default. The Board will take action without further hearing and, based on the  
20 relevant evidence contained in the Default Decision Evidence Packet in this matter, as well as  
21 taking official notice of all the investigatory reports, exhibits and statements contained therein on  
22 file at the Board's offices regarding the allegations contained in Accusation No. 2012-392, finds  
23 that the charges and allegations in Accusation No. 2012-392, are separately and severally, found  
24 to be true and correct by clear and convincing evidence.

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10. Taking official notice of its own internal records, pursuant to Business and Professions Code section 125.3, it is hereby determined that the reasonable costs for Investigation and Enforcement is \$5,163.50 as of January 25, 2012.

## DETERMINATION OF ISSUES

1. Based on the foregoing findings of fact, Respondent Sharon Ann Moore has subjected her Registered Nurse License No. 488964 to discipline.

2. The agency has jurisdiction to adjudicate this case by default.

3. The Board of Registered Nursing is authorized to revoke Respondent's Registered Nurse License based upon the following violations alleged in the Accusation which are supported by the evidence contained in the Default Decision Evidence Packet in this case.

a. Respondent is subject to disciplinary action under Code section 2762(e) in that she falsified, or made grossly incorrect, or grossly inconsistent entries in hospital and patient records pertaining to controlled substances, when she withdrew medication but failed to chart the wastage or administration of the medication to patients.

b. Respondent is subject to disciplinary action pursuant to Code section 2762(a), on the grounds of unprofessional conduct, in that Respondent obtained and possessed controlled substances in violation of Code section 4060 and Health and Safety Code section 11173(a).

c. Respondent is subject to disciplinary action pursuant to Code section 2761(a) in that she acted unprofessionally when she obtained and possessed controlled substances from Scripps Memorial Hospital while on duty as a registered nurse.

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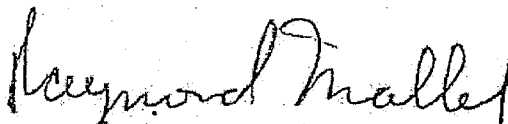
ORDER

IT IS SO ORDERED that Registered Nurse License No. 488964, heretofore issued to Respondent Sharon Ann Moore, is revoked.

Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective on August 31, 2012.

It is so ORDERED August 1, 2012



FOR THE BOARD OF REGISTERED NURSING  
DEPARTMENT OF CONSUMER AFFAIRS

80606708.DOC  
DOJ Matter ID:SD2011801246

Attachment:  
Exhibit A: Accusation

# Exhibit A

Accusation

1 KAMALA D. HARRIS  
Attorney General of California  
2 LINDA K. SCHNEIDER  
Supervising Deputy Attorney General  
3 RITA M. LANE  
Deputy Attorney General  
4 State Bar No. 171352  
110 West "A" Street, Suite 1100  
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P.O. Box 85266  
6 San Diego, CA 92186-5266  
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*Attorneys for Complainant*

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9 **BEFORE THE**  
**BOARD OF REGISTERED NURSING**  
**DEPARTMENT OF CONSUMER AFFAIRS**  
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

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12 **SHARON ANN MOORE, a.k.a.**  
13 **SHARON ANN BILLINGSLEY**  
14 **12067 Alta Carmel Court, Unit 60**  
**San Diego, CA 92128**

**ACCUSATION**

15 **Registered Nurse License No. 488964**

16 **Respondent.**

17  
18 **Complainant alleges:**

19 **PARTIES**

20 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her  
21 official capacity as the Executive Officer of the Board of Registered Nursing, Department of  
22 Consumer Affairs.

23 2. On or about March 31, 1993, the Board of Registered Nursing issued Registered  
24 Nurse License Number 488964 to Sharon Ann Moore, a.k.a. Sharon Ann Billingsley  
25 (Respondent). The Registered Nurse License was in full force and effect at all times relevant to  
26 the charges brought herein and will expire on April 30, 2013, unless renewed.

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JURISDICTION

3. This Accusation is brought before the Board of Registered Nursing (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2750 of Code provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.

5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license. Under section 2811(b) of the Code, the Board may renew an expired license at any time within eight years after the expiration.

STATUTORY PROVISIONS

6. Section 2761 of the Code states:

The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

(a) Unprofessional conduct, which includes, but is not limited to, the following:

7. Section 2762 of the Code states:

In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.

(e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any hospital, patient, or other record pertaining to the substances described in subdivision (a) of this section.

8. Section 4060 of the Code states, in pertinent part, that no person shall possess any controlled substance without a prescription by a physician.

1       9. Section 11032 of the Health and Safety Code provides, in pertinent part, that the term  
2 "narcotics" means controlled substances classified in Schedule I or II as defined in section 11054  
3 or 11055 of that code and that the term "restricted dangerous drugs" means controlled substances  
4 classified in Schedules III and IV as defined in sections 11056 and 11057 of that code.

5       10. Section 11173 (a) of the Health and Safety Code provides, in pertinent part, that (a)  
6 no person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure  
7 the administration of or prescription for controlled substances, (1) by fraud, deceit,  
8 misrepresentation, or subterfuge.

#### 9 COSTS

10       11. Section 125.3 of the Code provides, in pertinent part, that the Board may request the  
11 administrative law judge to direct a licentiate found to have committed a violation or violations of  
12 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and  
13 enforcement of the case.

#### 14 DRUGS

15       12. Pyxis is a trade name for an automated single-unit dose medication dispensing system  
16 that delivers medications, typically narcotics and controlled substances, to an individual  
17 authorized to access the system by using a password known only to that individual. Once the  
18 password is entered, the medication drawer or container is unlocked and the medication is  
19 removed from the machine and then administered to the designated patient. The medication  
20 transaction is recorded and stored into a data system, containing information about the identity of  
21 who accessed the system, the name of the patient who is supposed to receive the medication, the  
22 time the system was accessed, the type of medication removed and the quantity of medication that  
23 was removed. Sometimes only portions of the withdrawn narcotics are given to the patient. The  
24 portions not given to the patient are referred to as wastage. This wastage must be witnessed by  
25 another authorized user and is also recorded by the Pyxis machine.

26       13. Alprazolam, the generic name for Xanax, is a Schedule IV controlled substance under  
27 California Health and Safety Code section 11057(d)(1), and is classified as a dangerous drug

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1 pursuant to Business and Professions Code section 4022. Alprazolam tablets are indicated for the  
2 management of anxiety disorder or the short-term relief of symptoms of anxiety.

3 14. Hydrocodone, also known as Vicodin, which is designated by Health and Safety Code  
4 section 11056(e)(4) as a narcotic drug and a Schedule III controlled substance, and by Business  
5 and Professions Code section 4022 as a dangerous drug, and is used as a narcotic analgesic in the  
6 relief of pain.

7 15. Hydromorphone, sold under the brand name Dilaudid, is a Schedule II controlled  
8 substance as designated by Health and Safety Code Section 11055(b)(1)(J) and is a dangerous  
9 drug pursuant to Business and Professions Code section 4022. Hydromorphone is used to treat  
10 moderate to severe pain.

11 16. Lorazepam, sold under the brand name Ativan, is a Schedule IV controlled substance  
12 as designated by Health and Safety Code section 11057(d)(16), and is a dangerous drug pursuant  
13 to Business and Professions Code section 4022. Lorazepam is used in the treatment of anxiety  
14 disorders and for short-term (up to 4 months) relief of the symptoms of anxiety.

15 17. Morphine/Morphine Sulfate is a Schedule II controlled substance as designated by  
16 Health and Safety Code section 11055, subdivision (b)(1)(M), and is a dangerous drug pursuant  
17 to Code section 4022.

18 18. Percocet, a brand name for acetaminophen and oxycodone, is a Schedule II controlled  
19 substance as designated by Health and Safety Code section 11055, subdivision (b)(1)(N), and is a  
20 dangerous drug pursuant to Business and Professions Code section 4022.

#### 21 FACTUAL ALLEGATIONS

22 19. During the months of August 2008 through September 2008, Respondent was  
23 employed as a registered nurse at Scripps Memorial Hospital in La Jolla, California.

24 20. Pyxis Reports for the time period of August 2008 through September 2008, and  
25 patient medical records revealed, that drugs withdrawn by Respondent from the Pyxis, were either  
26 not given to the patients or their administration or wastage were not documented by Respondent.  
27 Regardless, Respondent failed to account for medication in her possession. A review of  
28 Respondent's Pyxis drug activity revealed the following:

1        21. Patient A: On July 25, 2008, patient A had a physician's order for  
2 Hydrocodone/APAP 10-325 mg 2 tabs by mouth every four hours and Hydromorphone 1.5 mg  
3 IV prn severe pain.

4        a. On August 1, 2008, at 1942 hours, Respondent withdrew two tablets of  
5 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
6 administration or wastage of this medication on the Medication Administrative Record (MAR)  
7 and in the nursing notes. Two tablets of hydrocodone are unaccounted for.

8        b. On August 2, 2008, at 0012 hours, Respondent withdrew two tablets of  
9 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
10 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
11 of hydrocodone are unaccounted for.

12        c. On August 2, 2008, at 0519 hours, Respondent withdrew two tablets of  
13 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
14 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
15 of hydrocodone are unaccounted for.

16        d. On August 2, 2008, at 2011 hours, Respondent withdrew two tablets of  
17 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
18 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
19 of hydrocodone are unaccounted for.

20        e. On August 2, 2008, at 2344 hours, Respondent withdrew two tablets of  
21 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
22 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
23 of hydrocodone are unaccounted for.

24        f. On August 3, 2008, at 0457 hours, Respondent withdrew two tablets of  
25 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
26 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
27 of hydrocodone are unaccounted for.

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- 1 g. On August 3, 2008, at 0517 hours, Respondent withdrew two tablets of  
2 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
3 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
4 of hydrocodone are unaccounted for.
- 5 h. On August 3, 2008, at 0517 hours, Respondent withdrew Lorazepam 4 mg IV from  
6 Pyxis for patient A. However, patient A's prescription for Lorazepam had been discontinued on  
7 July 28, 2008 and Respondent had withdrawn medication from the Pyxis that was not ordered for  
8 patient A. Respondent failed to chart the administration or wastage of this medication on the  
9 MAR and in the nursing notes. Lorazepam 4 mg IV is unaccounted for.
- 10 i. On August 3, 2008, at 0518 hours, Respondent withdrew Hydromorphone 1 mg IV  
11 from Pyxis for patient A. Respondent failed to chart the administration or wastage of this  
12 medication on the MAR and in the nursing notes. Hydromorphone 1 mg IV is unaccounted for
- 13 j. On August 3, 2008, at 1952 hours, Respondent withdrew two tablets of  
14 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
15 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
16 of hydrocodone are unaccounted for.
- 17 k. On August 3, 2008, at 2329 hours, Respondent withdrew two tablets of  
18 Hydrocodone/APAP 10-325 mg from Pyxis for patient A. Respondent failed to chart the  
19 administration or wastage of this medication on the MAR and in the nursing notes. Two tablets  
20 of hydrocodone are unaccounted for.
- 21 22. Patient B: On August 7, 2008, patient B had a physician's order for Hydrocodone 2  
22 tabs every four hours for severe pain. On August 15, 2008, patient B had a physician's order for  
23 Morphine Sulfate 2 mg IV q 30 min prn mild pain and Morphine Sulfate 4 mg IV q 30 min prn  
24 moderate to severe pain.
- 25 a. On August 16, 2008, at 0424 hours, Respondent withdrew two tablets of  
26 Hydrocodone 5/500 mg from Pyxis for patient B. Respondent failed to chart the administration  
27 or wastage of this medication on the MAR and in the nursing notes. Two tablets of hydrocodone  
28 are unaccounted for.

- 1       b.    On August 20, 2008, at 0028 hours, Respondent withdrew Morphine Sulfate 2 mg  
2   carpuject from Pyxis for patient B. Respondent failed to chart the administration or wastage of  
3   this medication on the MAR and in the nursing notes. Morphine Sulfate 2 mg are unaccounted  
4   for.
- 5       c.    On August 20, 2008, at 0029 hours, Respondent withdrew two tablets of  
6   Hydrocodone 5/500 mg from Pyxis for patient B. Respondent failed to chart the administration  
7   or wastage of this medication on the MAR and in the nursing notes. Two tablets of hydrocodone  
8   are unaccounted for.
- 9       d.    On August 20, 2008, at 1934 hours, Respondent withdrew Morphine Sulfate two 2  
10   mg carpuject from Pyxis for patient B. Respondent withdrew medication in excess of what was  
11   prescribed and failed to chart the administration or wastage of this medication on the MAR and in  
12   the nursing notes. Morphine Sulfate 2 mg are unaccounted for.
- 13      e.    On August 21, 2008, at 0306 hours, Respondent withdrew two tablets of  
14   Hydrocodone 5/500 mg from Pyxis for patient B. Respondent failed to chart the administration  
15   or wastage of this medication on the MAR and in the nursing notes. Two tablets of hydrocodone  
16   are unaccounted for.
- 17      23.   Patient C: On August 19, 2008, patient C had a physician's order for Percocet every  
18   two hours for moderate pain. On September 1, 2008, patient C had a physician's order for  
19   Alprazolam .25 mg tab q 3 hours prn anxiety. On September 3, 2008, patient C had a physician's  
20   order for Morphine Sulfate 1 mg IV every two hours prn for mild pain.
- 21      a.    On August 24, 2008, at 2110 hours, Respondent withdrew one tablet of  
22   Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
23   administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
24   oxycodone is unaccounted for.
- 25      b.    On August 25, 2008, at 0525 hours, Respondent withdrew one tablet of  
26   Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
27   administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
28   oxycodone is unaccounted for.

- 1 c. On August 25, 2008, at 1842 hours, Respondent withdrew one tablet of  
2 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
3 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
4 oxycodone is unaccounted for.
- 5 d. On August 25, 2008, at 2156 hours, Respondent withdrew one tablet of  
6 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
7 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
8 oxycodone is unaccounted for.
- 9 e. On August 30, 2008, at 0059 hours, Respondent withdrew two tablets of  
10 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent withdrew medication in  
11 excess of what was prescribed and failed to chart the administration or wastage of this medication  
12 on the MAR and in the nursing notes. Two tablets of oxycodone are unaccounted for.
- 13 f. On August 30, 2008, at 2146 hours, Respondent withdrew one tablet of  
14 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
15 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
16 oxycodone is unaccounted for.
- 17 g. On August 31, 2008, at 0201 hours, Respondent withdrew one tablet of  
18 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
19 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
20 oxycodone is unaccounted for.
- 21 h. On September 1, 2008, at 0444 hours, Respondent withdrew two tablets of  
22 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent withdrew medication in  
23 excess of what was prescribed and failed to chart the administration or wastage of this medication  
24 on the MAR and in the nursing notes. Two tablets of oxycodone are unaccounted for.
- 25 i. On September 4, 2008, at 2124 hours, Respondent withdrew Morphine Sulfate 2 mg  
26 carpuject from Pyxis for patient C. Respondent charted on the MAR that on September 4, 2008 at  
27 2130 hours, she administered Morphine Sulfate 1 mg carpuject to patient C. Respondent  
28 withdrew medication in excess of what was prescribed and failed to chart the administration or

1 wastage, or otherwise account for the extra 1 mg of morphine sulfate that she removed from the  
2 Pyxis. Respondent failed to chart the administration or wastage of this medication in the nursing  
3 notes. Additionally, there are no pain entries by Respondent. Morphine Sulfate 1 mg is  
4 unaccounted for.

5 j. On September 4, 2008, at 2318 hours, Respondent withdrew one tablet of Alprazolam  
6 .25 mg from Pyxis for patient C. Respondent charted on the MAR that on September 4, 2008 at  
7 2200 hours, she administered one tablet of Alprazolam .25 mg to patient C. Respondent charted  
8 in the MAR that she had given Alprazolam to patient C, 1 hour and 18 minutes before she had  
9 actually removed the Alprazolam from the Pyxis machine. Additionally, Respondent failed to  
10 chart the administration of this medication in the nursing notes.

11 k. On September 5, 2008, at 0123 hours, Respondent withdrew one tablet of  
12 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
13 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
14 oxycodone is unaccounted for.

15 l. On September 5, 2008, at 0124 hours, Respondent withdrew one tablet of Alprazolam  
16 .25 mg from Pyxis for patient C. Respondent failed to chart the administration or wastage of this  
17 medication on the MAR and in the nursing notes. One tablet of alprazolam is unaccounted for.

18 m. On September 5, 2008, at 0615 hours, Respondent withdrew one tablet of  
19 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
20 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
21 oxycodone is unaccounted for.

22 n. On September 5, 2008, at 0737 hours, Respondent withdrew Morphine Sulfate 2 mg  
23 carpuject from Pyxis for patient C. Respondent withdrew medication in excess of what was  
24 prescribed and failed to chart the administration or wastage of this medication on the MAR and in  
25 the nursing notes. Additionally, there are no pain entries by Respondent. Morphine sulfate 2 mg  
26 is unaccounted for.

27 o. On September 9, 2008, at 0014 hours, Respondent withdrew one tablet of  
28 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the

1 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
2 oxycodone is unaccounted for.

3 p. On September 13, 2008, at 0034 hours, Respondent withdrew one tablet of  
4 Oxycodone/APAP 5-325 mg from Pyxis for patient C. Respondent failed to chart the  
5 administration or wastage of this medication on the MAR and in the nursing notes. One tablet of  
6 oxycodone is unaccounted for.

### 7 FIRST CAUSE FOR DISCIPLINE

8 (False, Incorrect or Inconsistent Entries in Hospital/Patient Records)

9 24. Respondent is subject to disciplinary action under Code section 2762(e) in that she  
10 falsified, or made grossly incorrect, or grossly inconsistent entries in hospital and patient records  
11 pertaining to controlled substances, when she withdrew medication but failed to chart the wastage  
12 or administration of the medication to patients. The facts and circumstances are more specifically  
13 set forth in paragraphs 19 through 23 above, and are incorporated herein as though fully  
14 referenced.

### 15 SECOND CAUSE FOR DISCIPLINE

16 (Unprofessional Conduct – Obtain or Possess Controlled Substances)

17 25. Respondent is subject to disciplinary action pursuant to Code section 2762(a), on the  
18 grounds of unprofessional conduct, in that Respondent obtained and possessed controlled  
19 substances in violation of Code section 4060 and Health and Safety Code section 11173(a). The  
20 facts and circumstances are more specifically set forth in paragraphs 19 through 23 above, and are  
21 incorporated herein as though fully referenced.

### 22 THIRD CAUSE FOR DISCIPLINE

23 (Unprofessional Conduct)

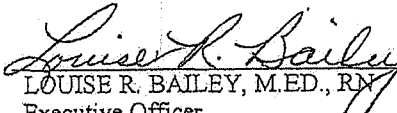
24 26. Respondent is subject to disciplinary action pursuant to Code section 2761(a) in that  
25 she acted unprofessionally when she obtained and possessed controlled substances from Scripps  
26 Memorial Hospital while on duty as a registered nurse. The facts and circumstances are more  
27 specifically set forth in paragraphs 19 through 23 above, and are incorporated herein as though  
28 fully referenced.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number 488964, issued to Sharon Ann Moore;
2. Ordering Sharon Ann Moore to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and
3. Taking such other and further action as deemed necessary and proper.

DATED: December 22, 2011

  
LOUISE R. BAILEY, M.ED., RN  
Executive Officer  
Board of Registered Nursing  
Department of Consumer Affairs  
State of California  
Complainant

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